FORM D OBS Mail Section

**UNITED STATES** MOI Processing SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**FORM D** 

Washington, DC 103

JUL 1 1 2008

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

150	/119
	SEC USE ONLY

Serial

DATE RECEIVED

1787111

Prefix

UNITORM EMITED OF ERING EXEMITION	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Private Placement of Participating Shares of Brookline Avenue Offshore Fund, Ltd.	PPOCESSED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE	1 KOCESSED
Type of Filing: New Filing	E JUL 1 8 2008
A. BASIC IDENTIFICATION DATA  1. Enter the information requested about the issuer	THOMSON DEUTEDS
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Brookline Avenue Offshore Fund, Ltd.	INCIVISON REUTERS
Address of Executive Offices (No. and Street, City, State, Zip Code)  C/O Brookline Avenue Partners, L.P., 100 Crescent Court, Suite 1100, Dallas, Texas 75201	e Number (Including Area Code) (214) 775-3100
Address of Principal Business Operations (No. and Street, City, State, Zip Code) Telephone Number (Including (if different from Executive Offices)	g Area Code)
Brief Description of Business Investment Partnership	
Type of Business Organization	Cayman Islands exempted
□ business trust □ limited partnership, to be formed o	company incorporated with limited liability
Actual or Estimated Date of Incorporation or Organization:  1 1 0 6  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: FN  CN for Canada; FN for other foreign jurisdiction)	☐ X Actual ☐ Estimated
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77dd	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exreceived by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or or	change Commission (SEC) on the earlier of the date it is certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocosignatures.	
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes there changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.	to, the information requested in Part C, and any material
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE are must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a preco amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of the ATTENTION	endition to the claim for the exemption, a fee in the proper
Failure to file notice in the appropriate states will not result in a loss of the federal exempt the appropriate federal notice will not result in a loss of an available state exemption predicated on the filing of a federal notice.	



SEC 1972 (2-97)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

_			A. BASIC IDEN	TIFICATION DATA		
2.	Enter the information r	equested for the fo	llowing:			
x x x	Each beneficial owner issuer;	having the power	has been organized within to vote or dispose, or direct porate issuers and of corpa	t the vote or disposition of		e of a class of equity securities of the artnership issuers; and
<u>X</u>						
Ch	neck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	⊠ Manager
	Il Name (Last name first,	· ·				
Bu		ress (Number and	Street, City, State, Zip Cod as 75201	le)		
Pa	neck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ Member of the General of the General Partner
	Il Name (Last name first, otnik, Charles B.	if individual)				
Bu	siness or Residence Add	ress (Number and liners, L.P., 100 C	Street, City, State, Zip Cod rescent Court, Suite 1100	le) ), Dallas, Texas 75201		
Ch	neck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ Member of the General Partner
M	ll Name (Last name first, orano, Richard M., II			· · ·		
			Street, City, State, Zip Cod			
	b Brookline Avenue Par neck Box(es) that Apply:	Promoter	rescent Court, Suite 1100  Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
	Il Name (Last name first, iddick, Geoff	if individual)		<del></del>		Trutting
Βι	isiness or Residence Add		Street, City, State, Zip Codrescent Court, Suite 1100			·
	neck Box(es) that Apply:		Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Fu	ll Name (Last name first,	if individual)				
Вι	siness or Residence Add	ress (Number and	Street, City, State, Zip Cod	le)		
Cŀ	neck Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Fu	ll Name (Last name first,	if individual)				
Βι	siness or Residence Add	ress (Number and	Street, City, State, Zip Cod	le)		
Cł	neck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Fu	Ill Name (Last name first,	if individual)				
Βι	isiness or Residence Add	ress (Number and	Street, City, State, Zip Cod	le)		
_						

						B. IN	FORM	IATIO	N ABO	UT OI	FERI	NG	•	
1. Н	Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.										Yes	No ⊠		
2. W	What is the minimum investment that will be accepted from any individual?  Does the offering permit joint ownership of a single unit:											\$ <u>5,0</u>	00,000	
3. D	Does the offering permit joint ownership of a single unit:												Yes ⊠	No □
in of re (5	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full N	ame (Las	t name f	irst, if in	ıdividua	1)									
Busine	ss or Res	idence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)					
Name	of Assoc	iated Bro	oker or I	Dealer										<del>.</del>
	in Which													All States
(Check	: "All Sta [AK]	ites" or o	neck ind	[CA]	States).	(CT)	[DE]	[DC]	[FL]	[GA]	(HIJ	[ID]	⊔	All States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	(MN)	[MS]	[MO]		
[MT]	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	(NC)	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[wi]	[WY]	[PR]		
Full N	ame (Las	t name f	irst, if in	dividua	l)					-		<u> </u>		
Busine	ss or Res	idence /	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)			<u> </u>		
Name	of Associ	iated Bro	oker or I	Dealer			_							•
	in Which													All States
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Las	t name f	īrst, if in	dividua	1)									
Busine	ss or Res	idence A	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Coo	le)			·-		·-·
Name	of Associ	iated Bro	oker or I	Dealer					. · -				<u>-</u> .	
	in Which										-	<u> </u>		
(Check	: "All Sta	ites" or o	check inc	dividual	States).		••••••	***********						All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box a and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt ..... Equity ☐ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests.... \$319,804,935.32 Other (Specify Participating Shares) \$319,804,935,32 \$319,804,935.32 \$319,804,935.32 Total Answer also in Appendix, Column 3, if filing under ULOE 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if the answer is "none" or "zero." Number Aggregate Dollar Amount Investors of Purchases \$319,804,935.32 Accredited Investors Non-accredited Investors 0 0 Total (for filings under Rule 504 only)..... N/A N/A Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Amount Type of offering Type of Security Sold Rule 505..... N/A N/A Regulation A..... N/A N/A N/A Rule 504 N/A N/A N/A Total ..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.....

Printing and Engraving Costs

Legal Fees.

Accounting Fees

Engineering Fees

Sales Commissions (specify finder's fees separately).....

Other Expenses (identify)

Total .....

X

0

0

0

92,400

92,400 0

	C. OFFERING PRICE, N	UMBER OF INVESTORS,	EXPENSES AND US	E OF PI	ROCEED	S
	b. Enter the difference between the aggrega and total expenses furnished in response to proceeds to the issuer."	Part C-Question 4.a. This differe	nce is the "adjusted gross			\$ <u>319,712,535.32</u>
5.	Indicate below the amount of the adjusted g each of the purposes shown. If the amount check the box to the left of the estimate. Th proceeds to the issuer set forth in response t	for any purpose is not known, fur total of the payments listed mu	nish an estimate and			
	, , , , , , , , , , , , , , , , , , ,			O Dir	rments to officers, ectors, & offiliates	Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate		C	\ <b>\$</b>		\$
	Purchase, rental or leasing and install	ation of machinery and equipmer	tC	s		\$
	Construction or leasing of plant build	ings and facilities		s		<b>s</b>
	Acquisition of other businesses (inclumay be used in exchange for the asset	iding the value of securities involus or securities of another issuer p	ved in this offering that ursuant to a merger) $\Box$	s		\$
	Repayment of indebtedness			s		<b>\$</b>
	Working capital			s		<b>s</b>
	Other (specify) (investments)			s		\$ <u>319,712,535.32</u>
	Column Totals			<b>S</b>	X	\$319,712,535.32
	Total Payments Listed (column totals	added)			\$ <u>319.7</u>	12,535.32
		D. FEDERAL SIGN	ATURE			
ign	issuer has duly caused this notice to be signed ature constitutes an undertaking by the issuer mation furnished by the issuer to any non-acc	to furnish to the U.S. Securities a	nd Exchange Commission			
Iss	uer (Print or Type)	Signature	Date			
Br	ookline Avenue Offshore Fund, Ltd.	Lutur 1		, 2008		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Ri	chard M. Morano II	Director and Member of the Ge	neral Partner of the Mana	ger of the	Issuer	
		ATTENTION	1			
	Intentional misstatements or om			ıs. (See	18 U.S.C	. 1001).

	E. STATE SIGNATURE								
1.	• • •	resently subject to any of the disqualification prov		Yes	No ⊠				
	See Appendi	x, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in by state law.	which this notice is	filed, a notice of	on Form D				
3.	The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators, upon written	request, information	furnished by t	he issuer to				
4.		ssuer is familiar with the conditions that must be s which this notice is filed and understands that the at these conditions have been satisfied.							
	e issuer has read this notification and knows t dersigned duly authorized person.	he contents to be true and has duly caused this not	ice to be signed on	its behalf by the	e 				
Iss	uer (Print or Type)	Signature	Date	• 0	_				
Bre	ookline Avenue Offshore Fund, Ltd.	full my mon of	July <u>9</u> , 2008						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							
Ric	ichard M. Morano II Director and Member of the General Partner of the Manager of the Issuer								

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## **APPENDIX**

1		2 3 4						5
	non-acc investor (Par	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Accredited Accredited			
AL			<del></del>					<u> </u>
AK								
AZ								
AR								
CA		х	\$93,557,500	20	\$93,557,500	0	\$0	No
СО								
СТ							•	
DE								
DC								
FL		х	\$500,000	1	\$500,000	0	\$0	No
GA	_							
HI								
ID							-	
IL								
IN								
1A								
KS				-				
KY								
LA								
ME								
MD								
MA								
MI								
MN								
MS								
МО								

## **APPENDIX**

1	2		3		4			5
	Intend to sell to and aggregate offering price offered in state (Part B- Item 1)  Type of security and aggregate offered in state (Part C- Type of investor and amount purchased in State (Part C- Type of investor and amount purchased in State (Part C- Item 1)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Accredited Accredited			
MT					· · · ·			
NE								
NV				<del></del>				
NH								
NJ					·			
NM								
NY		х	\$2,347,480.32	2	\$2,347,480.32	0	\$0	No
NC								
ND								
ОН								
ок								
OR			_					
PA								
RI								
SC								
SD								
TN			_					
TX		Х	\$1,000,000	1	\$1,000,000	0	\$0	No
UT								
VT								
VA					_			
WA								
wv								
WI								
WY								
PR								

